

# WATER WELL REPORT

Application No. \_\_\_\_\_

STATE OF WASHINGTON

Permit No.

(1) OWNER: Name Woody CFCIA Address 1403 N. Monrelding Rd OAK HARBOR  
(2) LOCATION OF WELL: County ISLAND - SE 1/4 NE 1/4 Sec 16 T. 32 N. R. 1 E. W.M.

Bearing and distance from section or subdivision corner

(3) **PROPOSED USE:** Domestic ☒ Industrial ☐ Municipal ☐  
Irrigation ☐ Test Well ☐ Other ☐

**(4) TYPE OF WORK:** Owner's number of well (if more than one) 2

New well	<input checked="" type="checkbox"/>	Method: Dug	<input type="checkbox"/>	Bored	<input type="checkbox"/>
Deepened	<input type="checkbox"/>	Cable	<input checked="" type="checkbox"/>	Driven	<input type="checkbox"/>
Reconditioned	<input type="checkbox"/>	Rotary	<input type="checkbox"/>	Jetted	<input type="checkbox"/>

(5) **DIMENSIONS:** Diameter of well 6 inches.  
 Drilled . . . . . ft. Depth of completed well 39 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6" Diam. from 0 ft. to 34 ft.

Threaded ☐ " Diam. from ft. to ft.

Welded ☒ " Diam. from ft. to ft.

**Perforations:** Yes ☐ No ☒

Type of perforator used.....

SIZE of perforations ..... in. by ..... in.

..... perforations from ..... ft. to ..... ft.

..... perforations from ..... ft. to ..... ft.

..... perforations from ..... ft. to ..... ft.

**Screens:** Yes ☒ No ☐  
**Manufacturer's Name** Johnson  
**Type** STAINLESS **Model No.** \_\_\_\_\_  
**Diam.** 6 **Slot size** 15 **from** 3.4 **ft. to** 3.9 **ft.**  
**Diam.** \_\_\_\_\_ **Slot size** \_\_\_\_\_ **from** \_\_\_\_\_ **ft. to** \_\_\_\_\_ **ft.**

**Gravel packed:** Yes ☐ No ☒ **Size of gravel:** .....  
Gravel placed from ..... ft. to ..... ft.

**Surface seal:** Yes ☒ No ☐ To what depth? 18 + ft.  
Material used in seal BENTONITE  
Did any strata contain unusable water? Yes ☐ No ☒  
Type of water? \_\_\_\_\_ Depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_

(7) PUMP: Manufacturer's Name.....  
Type: ..... *Sub* ..... HP.....

(8) **WATER LEVELS:** Land-surface elevation above mean sea level. 100+ ft.  
 Static level 20 ft below top of well Date Dec 29  
 Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_  
 Artesian water is controlled by \_\_\_\_\_ (Cap, valve, etc.)

(9) **WELL TESTS:** Drawdown is amount water level is lowered below static level

Was a pump test made? Yes ☐ No ☐ If yes, by whom? \_\_\_\_\_

Yield: \_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs

11	19	18	97
11	11	11	91

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level
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[illegible]

Case	Age	Sex	Duration of disease	Site of lesion	Pathological findings	Response to treatment
1	45	Male	10 years	Right parietal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
2	52	Female	5 years	Left frontal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
3	68	Male	15 years	Right temporal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
4	72	Female	20 years	Left parietal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
5	78	Male	25 years	Right frontal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
6	82	Female	30 years	Left temporal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
7	85	Male	35 years	Right parietal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
8	88	Female	40 years	Left frontal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
9	92	Male	45 years	Right temporal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission
10	95	Female	50 years	Left parietal lobe	Large, well-circumscribed, solid, enhancing mass	Complete remission

<p>1. 姓名: _____</p> <p>2. 性别: _____</p> <p>3. 年龄: _____</p> <p>4. 职业: _____</p> <p>5. 住址: _____</p> <p>6. 联系电话: _____</p> <p>7. 电子邮箱: _____</p> <p>8. 身份证号: _____</p> <p>9. 婚姻状况: _____</p> <p>10. 教育程度: _____</p> <p>11. 健康状况: _____</p> <p>12. 其他: _____</p>	<p>1. 姓名: _____</p> <p>2. 性别: _____</p> <p>3. 年龄: _____</p> <p>4. 职业: _____</p> <p>5. 住址: _____</p> <p>6. 联系电话: _____</p> <p>7. 电子邮箱: _____</p> <p>8. 身份证号: _____</p> <p>9. 婚姻状况: _____</p> <p>10. 教育程度: _____</p> <p>11. 健康状况: _____</p> <p>12. 其他: _____</p>	<p>1. 姓名: _____</p> <p>2. 性别: _____</p> <p>3. 年龄: _____</p> <p>4. 职业: _____</p> <p>5. 住址: _____</p> <p>6. 联系电话: _____</p> <p>7. 电子邮箱: _____</p> <p>8. 身份证号: _____</p> <p>9. 婚姻状况: _____</p> <p>10. 教育程度: _____</p> <p>11. 健康状况: _____</p> <p>12. 其他: _____</p>
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Date of test .....

Baller test 20 gal./min. with 18 ft. drawdown after 2 hrs

Artesian flow ..... g.p.m. Date.....

Temperature of water..... Was a chemical analysis made? Yes ☐ No ☒

**(10) WELL LOG:**

**Formation:** Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
CLAY		10
HARD GRAVEL CLAY	10	32
WATER IN GRAVEL	32	39
CLAY	39	

Work started ..... 19..... Completed DEC ....., 1978

**WELL DRILLER'S STATEMENT:**

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME WHIDBEY WELL DRILLER  
(Person, firm, or corporation) (Type or print)

Address ONE HAWK

[Signed] Lewis Faler  
(Well Driller)

License No. 129 Date Dec 1979